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## BIB DATA SHEET

CONFIRMATION NO. 5931

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS                             | GROUP ART UNIT                   | ATTORNEY DOCKET<br>NO.  |                                    |
|---|---|-----------------------------------|----------------------------------|---|------------------------------------|
| 09/578,291  | 05/25/2000  | 705                               | 3691                             | D-1077+15   |                                    |
| <b>RULE</b>   |   |                                   |                                  |   |                                    |
| <b>APPLICANTS</b><br>Jay Paul Drummond, Massillon, OH;<br>Bob A. Cichon, Massillon, OH;<br>Mark D. Smith, North Canton, OH;<br>David Weis, Ashland, OH;<br>James R. Church, Kent, OH;<br>Mikal R. Gilger, Wadsworth, OH;  |   |                                   |                                  |   |                                    |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/144,761 07/20/1999<br>and is a CIP of 09/193,787 11/17/1998<br>which is a CIP of PCT/US97/21422 11/25/1997<br>and claims benefit of 60/091,887 07/07/1998<br>and claims benefit of 60/095,626 08/07/1998<br>and claims benefit of 60/098,907 09/02/1998<br>and said PCT/US97/21422 11/25/1997<br>claims benefit of 60/031,956 11/27/1996 |   |                                   |                                  |   |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |                                  |   |                                    |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>08/11/2000  |   |                                   |                                  |   |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /KELLY SCAGGS<br>CAMPEN/<br>Acknowledged _____<br>Examiner's Signature   | <input type="checkbox"/> Met after<br>Allowance<br>Initials   | <b>STATE OR<br/>COUNTRY</b><br>OH | <b>SHEETS<br/>DRAWINGS</b><br>35 | <b>TOTAL<br/>CLAIMS</b><br>27   | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>RALPH E. JOCKE<br>walker & jocke LPA<br>231 SOUTH BROADWAY<br>MEDINA, OH 44256<br>UNITED STATES   |   |                                   |                                  |   |                                    |
| <b>TITLE</b><br>Automated banking machine system with multiple entity interface   |   |                                   |                                  |   |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>906   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                    |